

(Caption of Case)

Example: Application for a Class C Charter Certificate from

John Doe dba Doe's Limo

BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

TRANSPORTATION COVER SHEET

ADRIAN M. FRAZIER
FRAZIER'S TRANSPORT

OFFICE OF REGULATORY STAFF

DEC 09 2011

DOCKET
NUMBER:

2011-517-I

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

(Please type or print)

Submitted by: ADRIAN M. FRAZIERTelephone: 843-343-2886Address: 106 ELIZA LANEFax: 843-875-7665SUMMERVILLE SC 29485

Other: _____

Email: amfrazierhatman@yahoo.com

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

- ☐ Application - Class A/A Restricted
- ☐ Application - Class C Taxi
- ☐ Application - Class C Charter
- ☐ Application - Class C Charter Bus
- ☒ Application - Class C Non-Emergency
- ☐ Application - Class C Stretcher Van
- ☐ Application - Class E Household Goods
- ☐ Application - Class E Hazardous Waste
- ☐ Application
- ☐ Request for Extension to Comply with Order
- ☐ Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded
- ☐ Request for Cancellation of Certificate
- ☐ Request for Suspension
- ☐ Request for Reinstatement

- ☐ Request for Name Change on Certificate
- ☐ Request to Amend Scope of Authority
- ☐ Request to Amend Tariff (rate increase, etc.)
- ☐ Request to Amend Passenger Limit
- ☐ Request
- ☐ Exhibit
- ☐ Late-Filed Exhibit
- ☐ Letter
- ☐ Proposed Order
- ☐ Publisher's Affidavit
- ☐ Reservation Letter
- ☐ Response
- ☐ Return to Petition
- ☐ Other: _____

RECEIVED

MAIL/DMS

RECEIVED

DEC 20 2011

PSC SC
CLERK'S OFFICE

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

935

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
101 Executive Center Drive, Suite 100
Columbia, South Carolina 29210
(Mailing address: Post Office Drawer 11649, Columbia, SC 29211)

Phone: (803) 896-5100 Fax: (803) 896-5199

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR
OPERATION OF MOTOR VEHICLE CARRIER

CLASS C - NON-EMERGENCY

Date: 11-28-2011

Application is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the provision of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.

1. Name under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trade name.)

ADRIAN M. FRAZIER dba FRAZIER'S TRANSPORT (sole proprietorship)

106 ELIZA LANE SUMMERVILLE SC 29485
Street Address of Applicant

Mailing Address of Applicant (if different from street address)

843-343-2886 843-875-7665
Phone Fax

amfrazierhatman@yahoo.com
Email Address

2. If the Applicant is an LLC or a corporation, a copy of the Certificate of Existence from the South Carolina Secretary of State and the Articles of Incorporation must be attached. (If incorporated outside of SC, attach South Carolina Secretary of State "Foreign Corporation" Certificate.)

3. Select Entity Type: (Check one)

☒ Individual Owner/Sole Proprietorship

☐ Partnership - List names and address of all person having an interest in the business.

☐ Corporation - List names and addresses of two principal officers.

Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

BALANCE SHEET

Balance at Time Application is Filed:

Month NOVEMBER Year 2011

Assets:

Cash	\$4000.00	
Receivables	0	
Real Estate	\$80,000.00	
Buildings and Equipment (Net)	0	
Motor Vehicles (Net)	\$5000.00	
Garage Equipment (Net)	\$5000.00	
Machinery and Tools (Net)	\$3000.00	
Supplies on Hand	\$2000.00	
Prepays and Other Assets	0	
Total Assets *	\$99,000.00	
<u>Liabilities and Equity:</u>		
Accounts Payable	\$900.00	
Notes Payable	0	
Mortgages Payable	\$900.00	
Equipment Obligations	0	
Accrued Salaries and Wages	0	
Other Accrued Obligations	0	
Other Liabilities	\$500.00	
Total Liabilities	\$2300.00	
Capital Stock	0	
Retained Earnings	0	
Total Equity	0	
Total Liabilities and Equity	\$2300.00	

* Total Assets = Total Liabilities and Equity

PROPOSED RATES AND CHARGES FOR SERVICE

Proposed Rates and Charges (List only maximum charges per mile or trip, and/or hourly rate):

Please see RATE CHART

Thanks
[Signature]

Requested Scope of Authority: Check all counties in which you are requesting permission to operate. You will only be allowed to operate in those counties checked below. You may request "Statewide" authority if you intend to operate in all counties in South Carolina.

- | | | | | |
|--|--|--|--|--|
| <input type="checkbox"/> Abbeville | <input type="checkbox"/> Cherokee | <input type="checkbox"/> Florence | <input type="checkbox"/> Lee | <input type="checkbox"/> Saluda |
| <input type="checkbox"/> Aiken | <input type="checkbox"/> Chester | <input checked="" type="checkbox"/> Georgetown | <input type="checkbox"/> Lexington | <input type="checkbox"/> Spartanburg |
| <input type="checkbox"/> Allendale | <input type="checkbox"/> Chesterfield | <input type="checkbox"/> Greenville | <input type="checkbox"/> Marion | <input type="checkbox"/> Sumter |
| <input type="checkbox"/> Anderson | <input type="checkbox"/> Clarendon | <input type="checkbox"/> Greenwood | <input type="checkbox"/> Marlboro | <input type="checkbox"/> Union |
| <input type="checkbox"/> Bamberg | <input checked="" type="checkbox"/> Colleton | <input type="checkbox"/> Hampton | <input type="checkbox"/> McCormick | <input checked="" type="checkbox"/> Williamsburg |
| <input type="checkbox"/> Barnwell | <input type="checkbox"/> Darlington | <input type="checkbox"/> Horry | <input type="checkbox"/> Newberry | <input type="checkbox"/> York |
| <input checked="" type="checkbox"/> Beaufort | <input type="checkbox"/> Dillon | <input type="checkbox"/> Jasper | <input type="checkbox"/> Oconee | |
| <input checked="" type="checkbox"/> Berkeley | <input checked="" type="checkbox"/> Dorchester | <input type="checkbox"/> Kershaw | <input checked="" type="checkbox"/> Orangeburg | <input type="checkbox"/> Statewide |
| <input type="checkbox"/> Calhoun | <input type="checkbox"/> Edgefield | <input type="checkbox"/> Lancaster | <input type="checkbox"/> Pickens | |
| <input checked="" type="checkbox"/> Charleston | <input type="checkbox"/> Fairfield | <input type="checkbox"/> Laurens | <input checked="" type="checkbox"/> Richland | |

Estimated Rates From The City of North Charleston To:

Daniels Island	Mile	Est. Rate	2 Passengers	15	\$ 38.65	4 Passengers	18	\$ 49.50
1 Passenger	12	\$ 30.00	3 Passengers	15	\$ 39.75	5 Passengers	18	\$ 52.50
2 Passengers	12	\$ 31.90	4 Passengers	15	\$ 42.75	Ladson	Mile	Est. Rate
3 Passengers	12	\$ 33.00	5 Passengers	15	\$ 45.75	1 Passenger	12	\$ 30.00
4 Passengers	12	\$ 36.00	6 Passengers	15	\$ 48.75	2 Passengers	12	\$ 31.90
5 Passengers	12	\$ 39.00	Johns Island	Mile	Est. Rate	3 Passengers	12	\$ 33.00
6 Passengers	12	\$ 42.00	1 Passenger	14	\$ 34.50	4 Passengers	12	\$ 36.00
Folly Beach	Mile	Est. Rate	2 Passengers	14	\$ 36.40	5 Passengers	12	\$ 39.00
1 Passenger	21	\$ 50.25	3 Passengers	14	\$ 37.50	6 Passengers	12	\$ 42.00
2 Passengers	21	\$ 52.15	4 Passengers	14	\$ 40.50	Moncks Co.	Mile	Est. Rate
3 Passengers	21	\$ 53.25	5 Passengers	14	\$ 43.50	1 Passenger	26	\$ 61.50
4 Passengers	21	\$ 56.25	6 Passengers	14	\$ 46.50	2 Passengers	26	\$ 63.40
5 Passengers	21	\$ 59.25	Kiawah Island	Mile	Est. Rate	3 Passengers	26	\$ 64.50
6 Passengers	21	\$ 62.25	1 Passenger	34	\$ 79.50	4 Passengers	26	\$ 67.50
Goose Creek	Mile	Est. Rate	2 Passengers	34	\$ 81.40	5 Passengers	26	\$ 70.50
1 Passenger	11	\$ 27.75	3 Passengers	34	\$ 82.50	6 Passengers	26	\$ 73.50
2 Passengers	11	\$ 29.65	4 Passengers	34	\$ 85.50	Mt. Pleasant	Mile	Est. Rate
3 Passengers	11	\$ 30.75	5 Passengers	34	\$ 88.50	1 Passenger	17	\$ 41.25
4 Passengers	11	\$ 33.75	6 Passengers	34	\$ 91.50	2 Passengers	17	\$ 43.15
5 Passengers	11	\$ 36.75	Summerville	Mile	Est. Rate	3 Passengers	17	\$ 44.25
6 Passengers	11	\$ 39.75	1 Passenger	20	\$ 48.00	4 Passengers	17	\$ 47.25
Isle of Palms	Mile	Est. Rate	2 Passengers	20	\$ 49.90	5 Passengers	17	\$ 50.25
1 Passenger	21	\$ 50.25	3 Passengers	20	\$ 51.00	6 Passengers	17	\$ 53.25
2 Passengers	21	\$ 52.15	4 Passengers	20	\$ 54.00	City of Chas.	Mile	Est. Rate
3 Passengers	21	\$ 53.25	5 Passengers	20	\$ 57.00	1 Passenger	12	\$ 30.00
4 Passengers	21	\$ 56.25	6 Passengers	20	\$ 60.00	2 Passengers	12	\$ 31.90
5 Passengers	21	\$ 59.25	Summerville	Mile	Est. Rate	3 Passengers	12	\$ 33.00
6 Passengers	21	\$ 62.25	1 Passenger	18	\$ 43.50	4 Passengers	12	\$ 36.00
James Island	Mile	Est. Rate	2 Passengers	18	\$ 45.40	5 Passengers	12	\$ 39.00
1 Passenger	15	\$ 36.75	3 Passengers	18	\$ 46.50	6 Passengers	12	\$ 42.00

Rates From The City of Charleston To:

Daniels Island	Miles	Est. Rate	2 Passengers	7	\$ 20.65	4 Passengers	25	\$ 66.25
1 Passenger	14	\$ 34.50	3 Passengers	7	\$ 21.75	5 Passengers	25	\$ 68.25
2 Passengers	14	\$ 36.40	4 Passengers	7	\$ 24.75	Ladson	Miles	Est. Rate
3 Passengers	14	\$ 37.50	5 Passengers	7	\$ 27.75	1 Passenger	22	\$ 52.50
4 Passengers	14	\$ 40.50	6 Passengers	7	\$ 30.75	2 Passengers	22	\$ 54.40
5 Passengers	14	\$ 43.50	Johns Island	Miles	Est. Rate	3 Passengers	22	\$ 55.50
6 Passengers	14	\$ 46.50	1 Passenger	15	\$ 36.75	4 Passengers	22	\$ 58.50
Folly Beach	Miles	Est. Rate	2 Passengers	15	\$ 38.65	5 Passengers	22	\$ 61.50
1 Passenger	13	\$ 32.25	3 Passengers	15	\$ 39.75	6 Passengers	22	\$ 64.50
2 Passengers	13	\$ 34.15	4 Passengers	15	\$ 42.75	Moncks Co.	Miles	Est. Rate
3 Passengers	13	\$ 35.25	5 Passengers	15	\$ 45.75	1 Passenger	33	\$ 77.25
4 Passengers	13	\$ 38.25	6 Passengers	15	\$ 48.75	2 Passengers	33	\$ 79.15
5 Passengers	13	\$ 41.25	Kiawah Island	Miles	Est. Rate	3 Passengers	33	\$ 80.25
6 Passengers	13	\$ 44.25	1 Passenger	26	\$ 61.50	4 Passengers	33	\$ 83.25
Goose Creek	Miles	Est. Rate	2 Passengers	26	\$ 63.40	5 Passengers	33	\$ 86.25
1 Passenger	18	\$ 43.50	3 Passengers	26	\$ 64.50	6 Passengers	33	\$ 89.25
2 Passengers	18	\$ 45.40	4 Passengers	26	\$ 67.50	Mt. Pleasant	Miles	Est. Rate
3 Passengers	18	\$ 46.50	5 Passengers	26	\$ 70.50	1 Passenger	8	\$ 21.00
4 Passengers	18	\$ 49.50	6 Passengers	26	\$ 73.50	2 Passengers	8	\$ 22.90
5 Passengers	18	\$ 52.50	Summerville	Miles	Est. Rate	3 Passengers	8	\$ 24.00
6 Passengers	18	\$ 55.50	1 Passenger	10	\$ 26.50	4 Passengers	8	\$ 27.00
Isle of Palms	Miles	Est. Rate	2 Passengers	10	\$ 27.40	5 Passengers	8	\$ 30.00
1 Passenger	15	\$ 36.75	3 Passengers	10	\$ 28.50	6 Passengers	8	\$ 33.00
2 Passengers	15	\$ 38.65	4 Passengers	10	\$ 31.50	North Chas.	Miles	Est. Rate
3 Passengers	15	\$ 39.75	5 Passengers	10	\$ 34.50	1 Passenger	12	\$ 30.00
4 Passengers	15	\$ 42.75	6 Passengers	10	\$ 37.50	2 Passengers	12	\$ 31.90
5 Passengers	15	\$ 45.75	Summerville	Miles	Est. Rate	3 Passengers	12	\$ 33.00
6 Passengers	15	\$ 48.75	1 Passenger	25	\$ 69.25	4 Passengers	12	\$ 36.00
James Island	Miles	Est. Rate	2 Passengers	25	\$ 61.15	5 Passengers	12	\$ 39.00
1 Passenger	7	\$ 18.75	3 Passengers	25	\$ 62.25	6 Passengers	12	\$ 42.00

DESCRIPTION OF EQUIPMENT

You are **not** required to own a vehicle to file an application. However, prior to being issued a certificate by ORS, you will be required to have obtained a vehicle.

Maximum Number of Passengers Vehicle is Equipped to Carry: (The number of passengers a vehicle is equipped to carry is based on the number of seatbelts in the vehicle, including the driver's seatbelt.)

- ☒ 1-7 Passengers, including driver
☐ 8-15 Passengers, including driver

MAKE	YEAR & MODEL	VIN#	EMPTY WEIGHT	WHEEL- CHAIR LIFT
HONDA	1995 ODYSSEY	JHMRA18H1SC019061	3300	NO

INSURANCE QUOTE

This form **MUST BE COMPLETED AND SIGNED** by an **AUTHORIZED INSURANCE COMPANY REPRESENTATIVE**. The insurance quote must be complete, listing current insurance premiums. At the discretion of the Commission, a copy of current insurance policies may be required. Do not provide a copy of insurance policies unless requested. You will not be required to purchase insurance until your application has been approved and an order has been issued by the PSC. ***THIS IS ONLY A QUOTE.***

The following insurance quote is for:

Adrian M Frazier

Name of Applicant

106 Eliza Ln Summerville SC 29485

Address of Applicant

Amount of Premium:

Liability Insurance \$ * 10,761.00 *quote only (PM)

The above quoted premium is for a term of 12 months.

Minimum Limits - Bodily injury and property damage limits will not be less than the following:

Limits Quoted

Liability Combined Each Occurance	\$ 1,000,000	<u>1,000,000</u>
Medical Payments per Person	\$ 1,000	<u>1,000</u>

National Casualty Company

Name of Insurance Company

8877 North Gentry Center Rd Sellsdale AZ

Home Office Address of Company

I am familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

December 5, 2011

Date

Vickie Melfi, C.T. Launders & Company

Authorized Insurance Company Representative's Signature

NOTICE:

If you wish to self-insure your motor vehicles for liability and property damage, you must comply with S.C. Code Ann. Sections 56-9-60 and 58-23-910. For more information, contact Vickie Coker with the Department of Motor Vehicles at (803) 896-8457.

If you wish to apply as a self-insured for worker's compensation coverage in South Carolina you may do so with the South Carolina Worker's Compensation Commission (WCC) provided that you will be able to: 1) post a surety bond or letter-of-credit with the WCC for a minimum of \$500,000, 2) agree to pay a yearly self-insurance tax, and 3) agree to pay an annual assessment to the South Carolina Second Injury Fund. For more information, contact the WCC Self-Insurance Division at (803) 737-5712 or on the web at www.wcc.state.sc.us/self-insurance.

Exhibit Fit, Willing, and Able (FWA)

ADRIAN M. FRAZIER

Name

U.S.D.O.T No.

ICC No.

1. Is there currently any outstanding judgments against the Applicant?

☐ Yes

☒ No

If Yes, indicate nature of judgement(s) against applicant.

2. Is Applicant familiar with all statutes and regulations, including safety regulations and governing for-hire motor carrier operations in South South Carolina, and does Applicant agree to operate in compliance with these statutes and regulations?

☒ Yes

☐ No

3. Is Applicant aware of the Commission's insurance requirements and the insurance premium costs associated therewith?

☒ Yes

☐ No

Exhibit on Driver Qualifications

1. Applicant understands that drivers must possess at least a current American Red Cross Standard First Aid and CPR Certificate or its equivalent, and records that verify/record such training must be kept on file at the company's primary place of business within South Carolina.

☒ Yes

☐ No

2. Applicant understands that drivers must be in compliance with all OSHA regulations.

☒ Yes

☐ No

3. Applicant understands that drivers must be trained in the use of all vehicle installed safety equipment such as two-way radios, first-aid kits, fire extinguishers, and other equipment as outlined in PSC Regulations.

☒ Yes

☐ No

4. Applicant understands that drivers must be able to physically perform actions necessary to assist persons with disabilities, including wheelchair users.

☒ Yes

☐ No

5. Applicant understands that drivers must wear a professional uniform and photo identification badge that easily identifies the driver and the company for whom the driver works.

☒ Yes

☐ No

6. Applicant understands that drivers must complete twelve (12) hours of in-service training annually in the area of safety, and records that verify/record such training must be kept on file at the company's primary place of business within South Carolina.

☒ Yes

☐ No

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
POST OFFICE DRAWER 11649
COLUMBIA, SOUTH CAROLINA 29211

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Volume 26, S.C. Code Ann. Regs., 1976), and R.38-400 through R.38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Volume 23A, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

The Applicant for the Certificate of Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.

Am Frazee

Applicant's Signature

Owner

Title of Applicant (e.g. President, Owner, etc.)

STATE OF SOUTH CAROLINA)

COUNTY OF)

DORCHESTER

SWORN TO BEFORE ME
This 8th day of Dec. 2011

Jama N. Gillespie
Notary Public

Commission Expires _____